Can Emotional Trauma Cause Physical Pain? Transcript

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Questioning the Trauma-Pain Link

The question that I want to answer The question that I want to answer today, which is often posed by some today, which is often posed by some individuals, is whether emotional trauma individuals, is whether emotional trauma can cause physical pain right away. I can cause physical pain right away. I want to answer not really, but it gets want to answer not really, but it gets complicated. So, I want to get into this complicated. So, I want to get into this topic.

Background and Clinical Perspective

Just to review, I'm I'm a physician Just to review, I'm I'm a physician trained in psychiatry as well as pain trained in psychiatry as well as pain medicine and addiction medicine. and I medicine and addiction medicine. and I used to direct the chronic pain rehab used to direct the chronic pain rehab program at the Cleveland Clinic and program at the Cleveland Clinic and continue to see chronic pain patients continue to see chronic pain patients that with psychiatric and mental health that with psychiatric and mental health concerns as well as addiction in my concerns as well as addiction in my current clinic and I've drawn from that current clinic and I've drawn from that experience various lessons. I've also experience various lessons.

Trauma as a Risk Factor for Chronic Pain

I've also done some research on this topic the done some research on this topic the relationship between for instance trauma relationship between for instance trauma and physical pain. So getting back to and physical pain. So getting back to the question, emotional trauma doesn't the question, emotional trauma doesn't really cause physical pain, but it's really cause physical pain, but it's important. It's related. It's what we important. It's related. It's what we call a risk factor. If individuals have call a risk factor.

Other Risk Factors and the Bigger Picture

If individuals have had trauma, not just emotional, but had trauma, not just emotional, but physical trauma of any sort in their physical trauma of any sort in their early adulthood, in their early early adulthood, in their early development, and that impacted them development, and that impacted them sufficiently, it can be a risk factor sufficiently, it can be a risk factor for later developing chronic disabling for later developing chronic disabling and complex pain. So if you think about and complex pain. So if you think about it, this is something that actually it, this is something that actually shapes somebody's not just psychology shapes somebody's not just psychology We've seen that those individuals who We've seen that those individuals who unfortunately go through a car accident, unfortunately go through a car accident, a surgery, some other injury, and then a surgery, some other injury, and then develop chronic disabling pain have had develop chronic disabling pain have had often, not always, but often often, not always, but often pre-existing risk factors. One of those pre-existing risk factors. One of those risk factors is trauma. That could be in risk factors is trauma. That could be in childhood, early adulthood, or even just childhood, early adulthood, or even just a traumatic psychological experience of a traumatic psychological experience of the event itself.

the event itself. So, as we meet individuals with chronic So, as we meet individuals with chronic pain that's very difficult to treat, pain that's very difficult to treat, that doesn't get better with standard that doesn't get better with standard treatments, we ask ourselves, what were treatments, we ask ourselves, what were the risk factors in this individual? We the risk factors in this individual? We ask ourselves if you got a hundred ask ourselves if you got a hundred individuals and they have the same or individuals and they have the same or similar car accident, injury, surgery, similar car accident, injury, surgery, not all of them are going to have not all of them are going to have chronic disabling pain. In fact, the chronic disabling pain. In fact, the majority of humans are going to bounce majority of humans are going to bounce back thankfully and they're going to back thankfully and they're going to

heal. But there are a select few that heal. But there are a select few that are going to have certain risk factors are going to have certain risk factors aside from trauma. We'll revisit that in aside from trauma. We'll revisit that in a second. There are other risk factors.

a second. There are other risk factors. We call it genetics or genetic loading. We call it genetics or genetic loading. Maybe there's a family history of Maybe there's a family history of neurologic disease or chronic pain.

neurologic disease or chronic pain. There are aspects of the injury or There are aspects of the injury or medical process that are risk factors. medical process that are risk factors.

For instance, if somebody has other For instance, if somebody has other medical conditions that contribute to medical conditions that contribute to things like inflammation, poor healing, things like inflammation, poor healing, that can influence if somebody develops that can influence if somebody develops chronic lasting complex pain. So there chronic lasting complex pain.

Parallel Pains and Mind-Body Connection

So there are a whole host of other factors to are a whole host of other factors to think about but for the question posed think about but for the question posed if we were to focus on trauma it is if we were to focus on trauma it is important but it's not alone the thing important but it's not alone the thing I I do want to talk a little bit about I I do want to talk a little bit about my work in this space. Um in uh 2019 I my work in this space. Um in uh 2019 I published a paper called parallel pains.

published a paper called parallel pains. It's an article that you can read if It's an article that you can read if you'd like, uh, where I talk about how you'd like, uh, where I talk about how trauma doesn't really cause physical trauma doesn't really cause physical pain, but it sort of coexists with pain, but it sort of coexists with physical pain in many individuals. And physical pain in many individuals. And it's important to attend to both. We it's important to attend to both. We want to get away from splitting up the want to get away from splitting up the mind and the body and thinking trauma mind and the body and thinking trauma causes physical stuff, physical stuff causes physical stuff, physical stuff causes mental trauma. It's all very much causes mental trauma. It's all very much more connected than we normally more connected than we normally appreciate. And instead of thinking them appreciate. And instead of thinking them as separate or one causing the other, as separate or one causing the other, it's very important to treat them both it's very important to treat them both equally and balance them out. This is equally and balance them out. This is why I use the term parallel pains. And why I use the term parallel pains. And in the article, I I talk about how in the article, I I talk about how different individuals with trauma and different individuals with trauma and ongoing stressors, meaning things that ongoing stressors, meaning things that are really challenging in their life, are really challenging in their life, have these kind of parallel pains to have these kind of parallel pains to their physical pain. I have three their physical pain. I have three examples in the article of individuals examples in the article of individuals with real life chronic disabling pain with real life chronic disabling pain and parallel and parallel psychological or social pains that are psychological or social pains that are also important to attend to. These can also important to attend to. These can be stemming from trauma or other be stemming from trauma or other hardships. It's important to balance hardships.

Intrapersonal and Interpersonal Dynamics

It's important to balance this out if we're going to have any this out if we're going to have any fighting chance in helping individuals fighting chance in helping individuals with chronic disabling pain. And this is with chronic disabling pain. And this is how I actually leverage my identity as how I actually leverage my identity as not just a pain physician but also not just a pain physician but also psychiatrist in helping individuals with psychiatrist in helping individuals with One thing that I represent in that One thing that I represent in that article that' be important for article that' be important for individuals to think about is how each individuals to think about is how each of us have brains but each of us also of us have brains but each of us also have minds. And in those minds we have have minds. And in those minds we have inner psychologies. They're very inner psychologies. They're very complex, right? Everything we've been complex, right? Everything we've been through, our development, our traits, through, our development, our traits, our tendencies, what we like, what we our tendencies, what we like, what we

don't like, all of that psychological don't like, all of that psychological mumbo jumbo, if you will, is really mumbo jumbo, if you will, is really critical to try to understand. In the critical to try to understand. In the article, Parallel Pains article that I article, Parallel Pains article that I mentioned, I delve into what we like to mentioned, I delve into what we like to call dynamics. Dynamics are kind of call dynamics. Dynamics are kind of psychological forces or, you know, psychological forces or, you know, variables that kind of, you know, play variables that kind of, you know, play off of each other. So for instance, off of each other. So for instance, somebody may have a lot of anxiety about somebody may have a lot of anxiety about something, but then they have what's something, but then they have what's called a defense. A defense means a called a defense. A defense means a coping strategy or a way to deal with coping strategy or a way to deal with that anxiety. Anyway, these dynamics that anxiety. Anyway, these dynamics which are very complex are important to which are very complex are important to try to understand in an individual who try to understand in an individual who has chronic disabling pain. And the has chronic disabling pain. And the dynamics fall into two different dynamics fall into two different categories which are represented by two categories which are represented by two different triangles, a red one and a different triangles, a red one and a blue one. We have intrapersonal dynamics blue one. We have intrapersonal dynamics that means things within our own that means things within our own psychology right so our own tendencies psychology right so our own tendencies traits coping mechanisms but then we traits coping mechanisms but then we also have interpersonal also have interpersonal dynamics that means kind of how we dance dynamics that means kind of how we dance or what our dynamic is with other people or what our dynamic is with other people it's really important interpersonal it's really important interpersonal dynamics this is where for instance dynamics this is where for instance early relationships might have been very early relationships might have been very important and they shape how you see the important and they shape how you see the world how you see future relationship world how you see future relationship relationships, how you see your doctor, relationships, how you see your doctor, how you see the health care system at how you see the health care system at large. These are dynamics or dances if large. These are dynamics or dances if you will, interactions, relations that you will, interactions, relations that are really important to attend to to are really important to attend to to understand how individuals navigate understand how individuals navigate health care or just seeing their chronic health care or just seeing their chronic pain doc for instance. Intrapersonal and pain doc for instance.

Central Sensitization and Chronic Pain

Intrapersonal and interpersonal dynamics are really interpersonal dynamics are really important to understanding those important to understanding those parallel pains. So where does trauma fit parallel pains. So where does trauma fit into all of this? As mentioned, if into all of this? As mentioned, if somebody has had early trauma, that's somebody has had early trauma, that's going to shape them not just going to shape them not just psychologically and being afraid of psychologically and being afraid of something that for for instance something that for for instance resembles something scary from the past, resembles something scary from the past, but also at a level that they may not but also at a level that they may not even appreciate or be aware of. It may even appreciate or be aware of. It may shape their neurological system. So shape their neurological system. So here's where we get into the here's where we get into the It turns out that individuals with It turns out that individuals with chronic pain that's lasting for years chronic pain that's lasting for years and only getting worse with time and and only getting worse with time and doesn't respond to any treatments, they doesn't respond to any treatments, they typically have something called central typically have something called central sensitization.

sensitization. sensitization. That's fancy speak for your central That's fancy speak for your central nervous system being kind of on high nervous system being kind of on high alert, sensitized.

alert, sensitized. Central central nervous systems are Central central nervous systems are composed of our brains and spinal cords. composed of our brains and spinal cords.

If you look at how pain circuitry If you look at how pain circuitry operates, it's not just your hand or operates, it's not just your hand or your belly or your back that's hurting, your belly or your back that's hurting, it's actually a complex circuit or a it's actually a complex circuit or a loop that's going from those areas up loop that's going from those areas up the spinal cord into the brain and then the spinal cord into the brain and then back down. So, it's a complex circuit back down. So, it's a complex circuit with a lot of moving parts. And it's with a lot of moving parts. And it's important for patients to appreciate important for patients to appreciate that as you navigate the health care

that as you navigate the health care system and you have chronic pain, the system and you have chronic pain, the natural tendency is to go see a natural tendency is to go see a gastroenterenterologist if your belly gastroenterenterologist if your belly hurts, a spine doctor if your back hurts, a spine doctor if your back hurts, an orthopod if your leg hurts, hurts, an orthopod if your leg hurts, etc. And that's all good and you should etc. And that's all good and you should not discard that. But if you don't not discard that. But if you don't attend to that central nervous system, attend to that central nervous system, you might be missing a big part of the you might be missing a big part of the puzzle, particularly with chronic puzzle, particularly with chronic complex disabling pain. So, back to complex disabling pain. So, back to trauma. Trauma actually has been has trauma. Trauma actually has been has been shown to centrally sensitize been shown to centrally sensitize individuals. What does that mean? That individuals. What does that mean? That means that unfortunately there are means that unfortunately there are hormonal changes at the time of early hormonal changes at the time of early trauma or worse chronic trauma that trauma or worse chronic trauma that impact how that nervous system then impact how that nervous system then adapts over time. And so now you have adapts over time. And so now you have years later a very sensitized nervous years later a very sensitized nervous system. Unfortunately, that sensitized system.

How Trauma Shapes the Nervous System

Unfortunately, that sensitized nervous system can be quietly simmering nervous system can be quietly simmering and then when an incident occurs, a car and then when an incident occurs, a car accident, a surgery, an injury, suddenly accident, a surgery, an injury, suddenly it sort of explodes if you will erupts it sort of explodes if you will erupts and now you have severe pain that is not and now you have severe pain that is not behaving or responding to treatments behaving or responding to treatments like most pain and it can transition like most pain and it can transition So, trauma is relevant. It's important.

So, trauma is relevant. It's important. Does it cause it alone? No. But it sort Does it cause it alone? No. But it sort of sets up a template of risk, if you of sets up a template of risk, if you will. And mixed with other factors can will. And mixed with other factors can result in chronic disabling pain. Not result in chronic disabling pain. Not attending to that trauma. Although we attending to that trauma. Although we can go back in time machines, but we can go back in time machines, but we can't we we can't ignore the residue of can't we we can't ignore the residue of that, the effects of trauma. So this is that, the effects of trauma. So this is where again going back to the parallel where again going back to the parallel pains part, we need to understand how pains part, we need to understand how people are sort of built people are sort of built psychologically. That's also stemming psychologically. That's also stemming from the trauma and development that's from the trauma and development that's early on. We can do something about early on. We can do something about that. That's where therapies, that. That's where therapies, counseling, and other strategies might counseling, and other strategies might help unlock the sort of mental and help unlock the sort of mental and psychological mystery that is at play in psychological mystery that is at play in the chronic pain patient.

the chronic pain patient.

Summary and Closing Thoughts

So, in summary, to answer the question, So, in summary, to answer the question, emotional trauma cannot by itself cause emotional trauma cannot by itself cause physical pain. However, emotional trauma physical pain. However, emotional trauma or really any significant trauma can or really any significant trauma can shape our bodies, our nervous systems, shape our bodies, our nervous systems, and our psychologies to then emerge from and our psychologies to then emerge from acute pain to lasting chronic complex acute pain to lasting chronic complex disabling pain. So, trauma is important disabling pain. So, trauma is important for us to attend to as well as the for us to attend to as well as the psychological effects of trauma.

psychological effects of trauma. I'm Dr. Javier Jimenez or Dr. X. Follow I'm Dr. Javier Jimenez or Dr. X. Follow me for more conversations about me for more conversations about